



Trap, Neuter/Spay, Release Application (Community Cats Only)

Please fill out application completely and e-mail to animalshelter@lakewoodoh.gov.

Please attach proof of TNR training with your application.

Name: _____

Address: _____

Phone Number: _____

Date(s) Trap(s) are to be set: _____

Plan for unintended trapped animals:

Property Owner's Name (if different): _____

Property Owner's Address: _____

Property Owner's Phone Number: _____

The property owner, if different from the Applicant, hereby authorizes Applicant to place humane traps on their property for the purpose of trapping, neutering, or spaying and returning community cats to control the community stray population. Both Applicant and Property Owner hereby releases and forever discharges the City of Lakewood, its directors, officers, agents, and employees from any and all liability, claims, liens, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arising from the negligent acts or omissions of Applicant and Property Owner for their performance of the Trap Neuter/Spay and Return program.

I hereby certify that I have read and understand the City of Lakewood's Community Cat Trap Neuter/Spay and Return Program Policies and Procedures. By signing this application, I acknowledge that failure to abide by them will result in revocation of this permit and denial of future applications.

Applicant Signature

Date

Property Owner Signature

Date

Animal Control Supervisor Approval

Date

